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DOCKET NO. JJM5014USNP

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: Stephen Bloor Art Unit 1615
Serial No.: 10/536,540 Confirmation No.: 9813
Filed : December 5, 2003 Examiner: N/A
For : WOUND DRESSINGS CONTAINING AN ENZYME THERAPEUTIC AGENT

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Mail Stop Missing Parts, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on

December 12, 2005

(Date of Deposit)

Blossom E. Loo

(Name of applicant, assignee, or Registered Representative)
/Blossom E. Loo/

(Signature)

December 12, 2005

(Date of Signature)

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Attn: Designated/Elected Office (DO/EO/US)

SUBMISSION OF COMBINED DECLARATION AND POWER OF ATTORNEY

Dear Sir:

Pursuant to 37 CFR 1.497(a) and (b), please find enclosed a Combined Declaration and Power of Attorney for the application of Stephen Bloor entitled WOUND DRESSINGS CONTAINING AN ENZYME THERAPEUTIC AGENT, attorney Docket No. JJM5014USNP, to complete, pursuant to 35 U.S.C 371. As required, a copy of the Notification of Missing Requirements mailed on November 14, 2005, is also attached.

Please charge Johnson & Johnson Deposit Account No. 10-0750/JJM0620USNP/BEL in the amounts of \$130.00 for submission of the Declaration pursuant to Section 1.16(e). The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Account No. 10-0750/JJM5014USNP/BEL. This sheet is submitted in triplicate.

12/19/2005 ATRANI 00000066 100750 10536540
01 FC:1617 130.00 DA

Respectfully submitted,

/Blossom E. Loo/

Blossom E. Loo
Reg. No. 36,858
Attorney for Applicant(s)

Johnson & Johnson
One Johnson & Johnson Plaza
New Brunswick, NJ 08933-7003
(732) 524-1596

Please type a plus sign (+) inside this box ☐

PTO/SB/01 (10-00)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.83) <input type="checkbox"/> Declaration Submitted with Initial Filing <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (Surcharge (37 CFR 1.16(e)) required)	Attorney Docket Number		JJM5014USNP	
	First Named Inventor		Stephen Bloor	
	<i>COMPLETE IF KNOWN</i>			
	Application Number		10/536,540	
	I.A. Filing Date		12/05/2003	
	Group Art Unit		1615	
	Examiner Name		N/A	

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.
 I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

WOUND DRESSINGS CONTAINING AN ENZYME THERAPEUTIC AGENT
(Title of the Invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) 12/05/2003 as United States Application Number or PCT International Application Number PCT/GB2003/005296 and was amended on (MM/DD/YYYY) ☐

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
0228554.2 2003/005296	GB PCT	12/06/2002 12/05/2003	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

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DECLARATION - Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	
		<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

Application Serial No.	Filing Date	Status
		Patented Patented Patented

I hereby appoint:



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AND



Practitioner(s) named below:
Name

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as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Address all telephone calls to Blossom E. Loo at telephone number (732) 524-1596.

Direct all correspondence to: Customer Number **000027777** OR ☐ Correspondence address below

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Address:

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)) <i>Stephen</i>		Family Name or Surname <i>Bloor</i>	
Inventor's Signature <i>Stephen Bloor</i>		Date <i>2 DEC 2005</i>	
Residence: City <i>Chorley</i>	State <i>Lancashire</i>	Country <i>UK</i>	Citizenship <i>GB</i>
Mailing Address <i>40 Harvest Drive, Whittle Le Woods</i>			
City <i>Chorley</i>	State <i>Lancashire</i>	ZIP <i>PR6 7QL</i>	Country <i>UK</i>

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